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|---|------------------------|-------------------------------|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | Attorney Docket No.    | 8733.916.00-US                |
|   | First Inventor         | Seok W. Lee                   |
|   | Title                  | LIQUID CRYSTAL DISPLAY DEVICE |
|   | Express Mail Label No. |                               |

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| <b>APPLICATION ELEMENTS</b><br><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b><br>MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |
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|---|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><i>(Submit an original, and a duplicate for fee processing)</i><br>2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br>3. <input checked="" type="checkbox"/> Specification [Total Pages <b>18</b> ]<br><i>(preferred arrangement set forth below)</i><br>- Descriptive title of the invention<br>- Cross Reference to Related Applications<br>- Statement Regarding Fed sponsored R & D<br>- Reference to sequence listing, a table,<br>or a computer program listing appendix<br>- Background of the Invention<br>- Brief Summary of the Invention<br>- Brief Description of the Drawings (if filed)<br>- Detailed Description<br>- Claim(s)<br>- Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>6</b> ]<br>5. Oath or Declaration [Total Sheets <b>3</b> ]<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br><i>(for continuation/divisional with Box 18 completed)</i><br>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br>Signed statement attached deleting<br>inventor(s) named in the prior application,<br>see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)<br>8. Nucleotide and/or Amino Acid Sequence Submission<br><i>(if applicable, all necessary)</i><br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies |
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|---|--|
| <b>ACCOMPANYING APPLICATIONS PARTS</b>  |  |
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney<br><i>(when there is an assignee)</i><br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS<br>Statement (IDS/PTO-1449 Citations)<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><i>(Should be specifically itemized)</i><br>15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i><br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input checked="" type="checkbox"/> Other: Check in the amount of \$790.00 |  |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

|   |   |           |                |          |                |
|---|---|-----------|----------------|----------|----------------|
| <b>19. CORRESPONDENCE ADDRESS</b>   |   |           |                |          |                |
| <input type="checkbox"/> Customer Number: _____ OR <input checked="" type="checkbox"/> Correspondence address below |   |           |                |          |                |
| Name  | MCKENNA LONG & ALDRIDGE LLP<br>Song K. Jung |           |                |          |                |
| Address   | 1900 K Street, N.W.                         |           |                |          |                |
| City  | Washington                                  | State     | DC             | Zip Code | 20006          |
| Country   | US  | Telephone | (202) 496-7500 | Fax      | (202) 496-7756 |

|                   |                     |                                   |                    |
|-------------------|---------------------|-----------------------------------|--------------------|
| Name (Print/Type) | Eric J. Nuss        | Registration No. (Attorney/Agent) | 40,106             |
| Signature         | <i>Eric J. Nuss</i> | Date                              | September 22, 2003 |



30827

PATENT TRADEMARK OFFICE

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| FEE TRANSMITTAL<br>for FY 2003   |  |      |  | Complete if Known    |                    |
|--|--|------|--|----------------------|--------------------|
| Effective 01/01/2003, Patent fees are subject to annual revision.              |  |      |  | Application Number   | Not Yet Assigned   |
|  |  |      |  | Filing Date          | September 22, 2003 |
|  |  |      |  | First Named Inventor | Seok W. Lee        |
|  |  |      |  | Examiner Name        | Not Yet Assigned   |
|  |  |      |  | Art Unit             | N/A                |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  |      |  | Attorney Docket No.  | 8733.916.00-US     |
| TOTAL AMOUNT OF PAYMENT  |  | (\$) |  | 790.00               |                    |

  

| METHOD OF PAYMENT (check all that apply)  |          | FEE CALCULATION (continued)   |                |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|----------|---|----------------|--|----------|-----------------|----------|-----------------|----------|----------|----------|----------|----------|------|-----|--------------------|--------|-------------------------------------|-----|------|-----|-------------------|----|--|-----|------|-----|------------------|-----|---------------------------|-----|------|-------|--------------------|-------|--|-----|------|------|------------------------|------|--|--|------|--------|------|--------|--|--|------|-----|--------------|----------------|--|--------------|------|---------|------|------|---|---|--------|-----|------|--------------------|--|--|------|-------|--------------|-----|---|--|-----------------|----------|----------|----------|--|----------|------|-----|------|-----|------------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|---------------------------------------|--|------|-------|------|-------|--|--|------|-----|------|----|--|--|---------------------|-------|------|-----|------------------------------------|------|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|-------|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input type="checkbox"/> Deposit Account<br>Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">50-0911</span><br>Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">McKenna Long &amp; Aldridge LLP</span>  |          | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> |                | Large Entity   |          | Small Entity    |          | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130 | 2051               | 65     | Surcharge - late filing fee or oath |     | 1052 | 50  | 2052              | 25 | Surcharge - late provisional filing fee or cover sheet |     | 1053 | 130 | 1053             | 130 | Non-English specification |     | 1812 | 2,520 | 1812               | 2,520 | For filing a request for <i>ex parte</i> reexamination |     | 1804 | 920* | 1804                   | 920* | Requesting publication of SIR prior to Examiner action |  | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action  |  | 1251 | 110 | 2251         | 55             | Extension for reply within first month |              | 1252 | 410     | 2252 | 205  | Extension for reply within second month |   | 1253   | 930 | 2253 | 465                | Extension for reply within third month |  | 1254 | 1,450 | 2254         | 725 | Extension for reply within fourth month |  | 1255            | 1,970    | 2255     | 985      | Extension for reply within fifth month |          | 1401 | 320 | 2401 | 160 | Notice of Appeal       |  | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 140 | Request for oral hearing              |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding      |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable                           |  | 1453                | 1,300 | 2453 | 650 | Petition to revive - unintentional |      | 1501 | 1,300 | 2501 | 650 | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37CFR 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |          | Small Entity  |                | Fee Description  | Fee Paid |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code  | Fee (\$)       |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130      | 2051  | 65             | Surcharge - late filing fee or oath  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50       | 2052  | 25             | Surcharge - late provisional filing fee or cover sheet                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130      | 1053  | 130            | Non-English specification  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520    | 1812  | 2,520          | For filing a request for <i>ex parte</i> reexamination                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*     | 1804  | 920*           | Requesting publication of SIR prior to Examiner action                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*   | 1805  | 1,840*         | Requesting publication of SIR after Examiner action                        |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110      | 2251  | 55             | Extension for reply within first month                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 410      | 2252  | 205            | Extension for reply within second month                                    |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 930      | 2253  | 465            | Extension for reply within third month                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,450    | 2254  | 725            | Extension for reply within fourth month                                    |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 1,970    | 2255  | 985            | Extension for reply within fifth month                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 320      | 2401  | 160            | Notice of Appeal   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 320      | 2402  | 160            | Filing a brief in support of an appeal                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 280      | 2403  | 140            | Request for oral hearing   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510    | 1451  | 1,510          | Petition to institute a public use proceeding                              |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110      | 2452  | 55             | Petition to revive - unavoidable   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,300    | 2453  | 650            | Petition to revive - unintentional   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,300    | 2501  | 650            | Utility issue fee (or reissue)   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 470      | 2502  | 235            | Design issue fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 630      | 2503  | 315            | Plant issue fee  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130      | 1460  | 130            | Petitions to the Commissioner  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50       | 1807  | 50             | Processing fee under 37 CFR 1.17(q)  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180      | 1806  | 180            | Submission of Information Disclosure Stmt                                  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40       | 8021  | 40             | Recording each patent assignment per property (times number of properties) | 40.00    |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 750      | 2809  | 375            | Filing a submission after final rejection (37 CFR 1.129(a))                |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 750      | 2810  | 375            | For each additional invention to be examined (37CFR 1.129(b))              |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 750      | 2801  | 375            | Request for Continued Examination (RCE)                                    |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900      | 1802  | 900            | Request for expedited examination of a design application                  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td>750.00</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td>(\$)</td> <td>750.00</td> </tr> </tbody> </table> |          | Large Entity  |                | Small Entity   |          | Fee Description | Fee Paid | Fee Code        | Fee (\$) | Fee Code | Fee (\$) | 1001     | 750      | 2001 | 375 | Utility filing fee | 750.00 | 1002                                | 330 | 2002 | 165 | Design filing fee |    | 1003   | 520 | 2003 | 260 | Plant filing fee |     | 1004                      | 750 | 2004 | 375   | Reissue filing fee |       | 1005   | 160 | 2005 | 80   | Provisional filing fee |      | <b>SUBTOTAL (1)</b>                                    |  |      |        | (\$) | 750.00 | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2"></th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>17</td> <td>-20** =</td> <td></td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>1</td> <td>-3** =</td> <td></td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td>(\$)</td> <td>0.00</td> </tr> </tbody> </table> |  |      |     | Extra Claims | Fee from below | Fee Paid                               | Total Claims | 17   | -20** = |      | 0.00 | Independent Claims                      | 1 | -3** = |     | 0.00 | Multiple Dependent |  |  |      |       | Large Entity |     | Small Entity                            |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code                               | Fee (\$) | 1202 | 18  | 2202 | 9   | Claims in excess of 20 |  | 1201 | 84  | 2201 | 42  | Independent claims in excess of 3      |  | 1203 | 280 | 2203 | 140 | Multiple dependent claim, if not paid |  | 1204 | 84    | 2204 | 42    | ** Reissue independent claims over original patent |  | 1205 | 18  | 2205 | 9  | ** Reissue claims in excess of 20 and over original patent |  | <b>SUBTOTAL (2)</b> |       |      |     | (\$)                               | 0.00 |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity  |                | Fee Description  | Fee Paid |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code  | Fee (\$)       |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 750      | 2001  | 375            | Utility filing fee   | 750.00   |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 330      | 2002  | 165            | Design filing fee  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 520      | 2003  | 260            | Plant filing fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 750      | 2004  | 375            | Reissue filing fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005  | 160      | 2005  | 80             | Provisional filing fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (1)</b>   |          |   |                | (\$)   | 750.00   |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
|   |          | Extra Claims  | Fee from below | Fee Paid   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims  | 17       | -20** =   |                | 0.00   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Independent Claims  | 1        | -3** =  |                | 0.00   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Multiple Dependent  |          |   |                |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity  |                | Fee Description  | Fee Paid |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code  | Fee (\$)       |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18       | 2202  | 9              | Claims in excess of 20   |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84       | 2201  | 42             | Independent claims in excess of 3  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280      | 2203  | 140            | Multiple dependent claim, if not paid                                      |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84       | 2204  | 42             | ** Reissue independent claims over original patent                         |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18       | 2205  | 9              | ** Reissue claims in excess of 20 and over original patent                 |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (2)</b>   |          |   |                | (\$)   | 0.00     |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBMITTED BY</b><br>Name (Print/Type): <span style="border: 1px solid black; padding: 2px;">Eric J. Nuss</span><br>Signature: <span style="border: 1px solid black; padding: 2px;"><i>Eric J. Nuss</i></span>  |          | Registration No. (Attorney/Agent): <span style="border: 1px solid black; padding: 2px;">40,106</span><br>Telephone: <span style="border: 1px solid black; padding: 2px;">(202) 496-7537</span><br>Date: <span style="border: 1px solid black; padding: 2px;">September 22, 2003</span>  |                |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |        |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |        |  |  |      |     |              |                |  |              |      |         |      |      |   |   |        |     |      |                    |  |  |      |       |              |     |   |  |                 |          |          |          |  |          |      |     |      |     |                        |  |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |      |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |

\*\*or number previously paid, if greater; For Reissues, see above

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$)

40.00